Gender Affirming Care
Supply Order Form

Pucci's Pharmacy
3257 Folsom Blvd
Sacramento, CA 95816
Phone: 916-442-5891 / Fax: 916-442-4432

Prescriber Name
Address
City, State, Zip
Phone/Fax

Luer Lock Syringes w/o/Needles		**Indicate Quantity Requested**
BD 1 mL	08290-3096-28	
BD 3 mL	08290-3096-57	
BD 5 mL	08290-3096-46	
BD 10 mL	08290-3029-95	

Luer Lock Syringes w/Needles		
BD 3 mL Syringe w/18gx1.5" Needle	08290-3095-80	
BD 3 mL Syringe w/21gx1" Needle	08290-3095-75	
BD 3 mL Syringe w/21gx1.5" Needle	08290-3095-77	
BD 3 mL Syringe w/23gx1" Needle	08290-3095-71	
BD 3 mL Syringe w/23gx1.5" Needle	08290-3095-89	
BD 3 mL Syringe w/25gx1" Needle	08290-3095-81	
BD 3 mL Syringe w/25gx1.5" Needle	08290-3095-82	
BD 3 mL Syringe w/25gx5/8" Needle	08290-3095-70	

Needles		
BD Needles 18g X 1"	08290-3051-95	
BD Needles 18gx1.5"	08290-3051-96	
BD Needles 21gx1"	08290-3051-65	
BD Needles 23gx1"	08290-3051-45	
BD Needles 23gx1.5"	08290-3051-94	
BD Needles 25gx5/8"	08290-3051-22	
BD Needles 25gX1"	08290-3051-25	
BD Needles 25gx1.5"	08290-3051-27	

Additional Injection Supplies		
Sharps Container 1.5 quart	382903-054879	
Alcohol Swabs #200 / box	#58-204	

Directions: Use alcohol swab to cleanse the vial stopper, then use **mL**
syringe with **gauge needle to withdraw**
(injectable medication), remove larger gauge needle and replace with
gauge needle to administer injection. Cleanse skin with alcohol swab prior to administration.

Prescriber Signature: _____ **Date:** _____

Fax Completed Form to **916-442-4432** (No cover page necessary)